Effective October 1, 2000 O 8 0 5													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			g					RATE		FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			9 minus 20=		. 8			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 6			X40=		2.40	OR	X80=	,
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		/~ CO	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							l	TOTA		595	OR	TOTAL	
CLAIMS AS AMENDED - PART II											a - · ·	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMAL	LL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	. 9	Minus	2	9	=		X\$ 9:	=]	<u> </u>	OR	X\$18=	
AME	Independent	NITATION OF A	Minus	***	7 FCI 414	=		X40=			OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135	=		OR	+270=	
								TOT ADDIT. F			OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)								ا -ا		Literal		
IDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATI		ADDI- TIONAL FEE	17.	RATE	ADDI- TIONAL FEE
	Total	. 7	Minus	2	,0	=		X\$ 9	=		OR	X\$18=	
AMEN	Independent	· Ś	Minus	***	7	=		X40=	=		OR	V00	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
								+135 TO			OR	+270= TOTAL	*
ADD								ADDIT. F	EE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								1			1 (1) 1 (4)		
AMENDMENT C		REMAINING AFTER AMENDMENT		- NUM PREVI	MBER HOUSLY FOR	PRESENT EXTRA		RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 2	Minus	** 2	20	=		X\$ 9	=		OR	X\$18=	1
ME	Independent	• (Minus	***	9	=		X40=	=	1	OR	X80=	17.0
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM				_				
	If the entry in colu	mn 1 ie loee than t	he entry in col	ımn 2 w rit	'e "0" in co	lumn 3		+135			OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate											OR	TOTAL ADDIT. FEE	
	The "Highest Nur	nber Previously Pa	aid For" (Total o	or Independ	dent) is the	a highest numb	er fo	und in the	e apı	propriate bo	x in co	dumn 1.	

Application or Docket Number